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CONFIRMATION NO. 3795

SERIAL NUMBER 10/673,954	FILING OR 371(c) DATE 09/29/2003 RULE	CLASS 606	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. END 5208	
APPLICANTS Rudolph Nobis, Mason, OH; Michael Clem, Maineville, OH; Christopher J. Hess, Cincinnati, OH; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/06/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY OH	SHEETS DRAWING 7	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
ADDRESS 000027777					
TITLE Endoscopic mucosal resection device and method of use					
FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		